

# At the Center

Committed to Quality Care & Courteous Service

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A Message from Dr. Christina Ghaly, Interim CEO

How time flies . . .

In just three months, our Healthy Way LA patients will begin receiving notification from the State of California regarding their transition, effective January 1, 2014, into Medi-Cal. This is an exciting time for our patients. Their enrollment into Medi-Cal brings them greater financial stability and greater choice as to where they will receive their medical care. It is an exciting time for us as well – a time when we can and should be reaching out to patients to answer their questions and ensure they have the information they need to make LAC+USC their first choice for healthcare. In addition, it is also a time when we need to continue our focus on enhancing customer service on the front-lines. Our patients notice when you take the time to address their concerns. Whether it's stopping in the halls to assist someone who is lost, letting a patient go first to exit the building or the elevator, listening to a patient tell of their experience here when they didn't receive services in the way that we would want them delivered to us and taking action to help address these situations when we can. Patients notice and form their opinions of us and our facility with each and every interaction. Please take the time to stop, listen, respond and smile.

As we enter Summer, I want to extend a warm welcome to our incoming interns and residents. We are glad you are here and look forward to sharing the next few years with you as your further your training *At The Center*. I thank you for your thoughtful care of our patients and encourage you to take an active role in further improving services. We can only benefit from you sharing your ideas and your active engagement in our ongoing transformation. I wish you all the best this summer!!!



AT THE HISTORIC GENERAL HOSPITAL

By Nancy Alba Mullenax, Ph.D.

Executive Director, The Wellness Center At The Historic General Hospital

The remodel of The Historic General Hospital has begun in approximately 41,000 square feet of space on the first floor to make way for The Wellness Center. Once completed in the fall of 2013, eighteen nonprofit organizations co-located there will provide services to LAC+USC Medical Center patients, their families and the broader community. The adjoining exterior area will also be landscaped with wellness in mind; current plans include outdoor exercise and recreational equipment, seating and picnic areas, a children's playground, walking trails and gardens.

**"The Wellness Center will honor the history of healing at General Hospital by providing wellness resources and educational opportunities to the community"**  
**-Supervisor Gloria Molina**

Nonprofit program partners include Alma Family Services, American Diabetes Association, Arthritis Foundation, East Los Angeles Women's Center, Jovenes, Maternal and Child Health Access, National Multiple Sclerosis Society, Neighborhood Legal Services, Building a Healthier

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## Nurse Recognition Week

By Linda Felix, R.N.

Administrator, Department of Nursing

Through the doors of LAC+USC Medical Center walk the greatest Nurses! This is the message posted outside the entrance to the facility acknowledging the contribution our nurses make at LAC+USC. The facility celebrated *National Nurses Week* May 6<sup>th</sup> -10<sup>th</sup>, 2013, with the theme **"Delivering Quality and Innovation in Patient Care."** The week began with the annual Nurse Recognition Ceremony. Isabel Milan,

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## Wellness Center Cont'd

Community-Boyle Heights, Proyecto Jardin, Weingart East Los Angeles YMCA, Worker Education Resource Center, American Heart Association, Mexican-American Opportunity Foundation and the LAC Departments of Health Services, Public Health and Mental Health.

This collaborative effort will focus on combating chronic diseases by wellness programming, care coordination and patient navigation services. Working closely with our LAC+USC partner, The Wellness Center aims to serve as a catalyst for positive community change, individual well-being and the reduction of health care system costs through prevention.

Multiple collaborations are currently in place between LAC+USC providers and Wellness Center program partners. For example, the National Multiple Sclerosis Society will work with Dr. Lilyana Amezcua of the Keck Hospital of USC, Department of Neurology, to provide comprehensive services for individuals suffering with MS. In addition, The East Los Angeles Women's Center has partnered with the Violence Intervention Project to provide case management and counseling to persons affected by violence.

The Wellness Center at The Historic General Hospital is a project of the LAC+USC M.C. Foundation and a public/private partnership supported by First District Supervisor Gloria Molina, the Department of Health Services, The California Endowment, The California Wellness Foundation, LA Care and others. We encourage further joint efforts and welcome your inquiries at [wellnesscentergh@gmail.com](mailto:wellnesscentergh@gmail.com).

## Joint Commission Intra-Cycle Monitoring

Victoria E. Walsh MSN/ED, RNC-OB, CPHQ

Assistant Nursing Director, Office of Accreditation and Policy Management

The Joint Commission Intracycle Monitoring (ICM) – Focused Standards Assessment (FSA) took place May 1-3, 2013. The survey team comprised a Life Safety Specialist who was on site for the first day and three clinical surveyors that included a registered nurse and two physicians.

After three days of observations, interviews and review of policies and procedures, the Joint Commission had a total of 23 findings. Twelve Direct Impact findings in which LAC+USC has 45 days to attain compliance and 60 days to attain compliance for the remaining 11 Indirect Impact findings. Out of the 23 findings there are ten findings in which we will need to monitor for our compliance. The surveyors commented that although 23 findings may seem like a large number, it is very small for a facility as large as LAC+USC. They added that they found the facility to be highly compliant with the majority of the standards.

Most importantly, the surveyors had many positive comments for our staff and facility during the site visit. One surveyor commented, "This is a remarkable place" and "you are doing amazing stuff."

Thanks again to all the staff and their hard work and dedication that paved the way for a smooth and successful survey.

## Nurse Recognition Week, Cont'd

Interim Chief Nursing Officer, presented the 2012 Nurse of the Year winners in the categories of R.N., L.V.N., N.A., Honorable Mention, Merit and the **CARES** Nurse of the Year.

### R.N. of the Year



Julieth Wolfson Hurley, R.N., is the LAC+USC Medical Center 2012 Nurse of the Year recipient. She has worked 25 years in the Pediatric Intensive Care Unit. Ms. Wolfson is described by her peers as having an "incredible ability to identify areas of improvement and ensures that patients receive the highest quality of care."

### L.V.N. of the Year



Junard Pascua, L.V.N., works in Primary Care and is described by his supervisor as "working hard to ensure his patients have good care and has wonderful customer service."

Lidia Chavez, N.A., works in the Emergency Department and is described by her supervisor as "being a hard worker with high energy and is always helping her team to deliver quality care."

### N.A. of the Year



Merit Awards in the R.N. category include: Harrieth Madu (*Augustus Hawkins*), Myrna Rosales (*Recovery/Cardiac Cath*), Anika Simpson (*Psych ER*), Valerie Wiggins (*Ob/Gyn Clinic*), Julieth Wolfson-Hurley (*Pediatric Intensive Care*), Felera Torrence (*Radiation Clinic*) and Clarito Villanueva (*Augustus Hawkins*).

Merit Award in the L.V.N. category was awarded to Junard Pascua (*Primary Care*).

Merit Awards in the Nursing Attendant category include: Lidia Chavez (*DEM*), Leonard Harvey (*ENT*) and Demetria Johnson (*Pediatrics*).

Merit Award in the Clerk category was awarded to Marciano Chavez, (*BURN Unit*).

Congratulations to our nurse winners who are true ambassadors in the health profession *At The Center !!!*

# A Patient-Centered Medical Home Intervention at an Internal Medicine Resident Safety-Net Clinic

*JAMA Internal Medicine recently accepted our PCMH model for the Galaxy Project. Congratulations to all those involved At The Center.*

Michael E. Hochman, MD, MPH; Steven Asch, MD, MPH; Arek Jibilian, MD; Bharat Chaudry, MD; Ron Ben-Ari, MD; Eric Hsieh, MD; Margaret Berumen, M.S.; Shahrod Mokhtari, MD; Mohamad Raad, MD; Elisabeth Hicks, MA; Crystal Sanford; Norma Aguirre; Chi-hong Tseng, PhD; Sitaram Vangala, M.S.; Carol M. Mangione, MD, MSPH; and David A. Goldstein, MD

**Background:** The patient-centered medical home (PCMH) model holds promise for improving primary care delivery, but it has not been adequately tested in teaching settings.

**Methods:** We implemented an intervention guided by PCMH principles at a safety-net teaching clinic with resident physician providers. Two similar clinics served as controls. Using a cross-sectional design, we measured the impact on patient and resident satisfaction using the Consumer Assessment of Healthcare Providers and Systems survey and a validated teaching clinic survey, respectively. Both surveys were conducted at baseline and one year post-intervention. We also measured the impact on emergency room (ER) and hospital utilization.

**Results:** Following implementation of our intervention, the clinic's score on the National Committee for Quality Assurance's PCMH certification tool improved from 35 to 53 out of 100 possible points, though our clinic did not achieve all must-pass elements to qualify as a PCMH. During the study period, 4,676 patients were exposed to the intervention, of whom 39.9% utilized at least one program component. Compared to baseline, patient-reported access and overall satisfaction improved to a greater extent in the intervention clinic, and the composite satisfaction rating increased from 48% to 65% in the intervention clinic vs. 50% to 59% in the controls,  $P=0.04$ . The improvements were particularly notable for questions relating to access. For example, satisfaction with urgent appointment scheduling increased from 12% to 53% in the intervention clinic vs. 14% to 18% in the control clinic,  $P<0.001$ . Resident satisfaction also improved in the intervention clinic: the composite satisfaction score increased from 39% to 51% in the intervention clinic vs. a decrease from 46% to 42% in the controls,  $P=0.01$ . ER utilization did not differ significantly between the intervention and control clinics, and hospitalizations increased from 26 to 27 visits per 1,000 patients per month in the intervention clinic vs. a decrease from 28 to 25 in the controls,  $P=0.02$ .

**Conclusions:** Our PCMH-guided intervention, which represented a modest but substantive step towards the PCMH vision, had favorable effects on patient and resident satisfaction at a safety-net teaching clinic, but did not reduce ER or hospital utilization in the first year.

# Employee Health & Fitness

Mariana Pacheco, RN

Clinical Nursing Director, Med/Surge Units, Employee Health, Discharge Lounge

In order to comply with Federal and State laws regarding health and safety, all employees working on campus must have an annual health clearance. According to DHS Health Evaluation Policy 705, all employees are to have a health evaluations and screenings annually as a condition of employment. It is essential that we take care of our own health before we tend to the needs of our patients.

Employee Health *At The Center* began sending out emails to supervisors and employees informing them about upcoming health clearances due by the end of the month. If the workforce member has not complied by the middle of the month a "Direct Order" letter will be sent to the supervisor who will then give it to the employee.

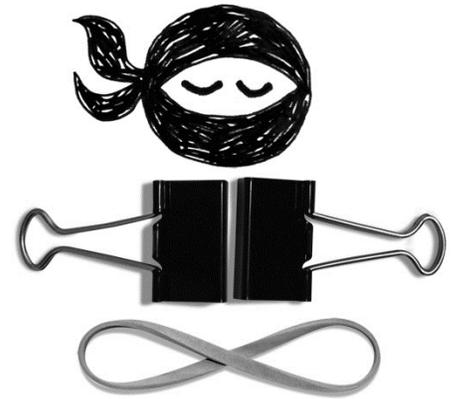
Employees can make an appointment or walk into the Employee Health Office. Here are a few helpful hints that can make your visit productive. If you need a PPD skin test for tuberculosis, the staff will need at least 2-3 days to read the test after it has been placed. Skin tests given on Thursdays cannot get read until the following Monday since the office is closed on weekends. Also, if you do not have documentation of your immunizations on file with Employee

Health and you cannot provide us the documentation, we will administer the required tests for you that will include mumps, rubella, rubeola, varicella and/or Hepatitis B. If your personal medical provider has these records,

please provide copies of all tests to Employee Health so we can update your file.

Employee Health is located in the Outpatient Building, 5th floor from 7 am to 5 pm, Monday through Friday. Our helpful staff can be reached at 323-226-5236 for an appointment or inquiries.

**Healthy Employees are . . .**



**. . . patient care champions!!!**



**CONGRATS!!!**

**DEM's Sidewalk CPR Team trained over 1,043 community members, an almost 10% increase over last year!!!**

# Change, Quality, Survival: ICD -10 and the Future

Shirley Lewis, DPA, RHIA, CPHQ  
Interim Director, Health Information Management

## ICD-10-CM, 1213: Myocardial Infarction

This is what it's going to feel like when we get the Medicare & Medicaid reports back that shows we were not 100% compliant with our coding. Learn the Code, Know the Code, Use the Code.

On January 16, 2009, the US Department of Health and Human Services (HHS) published the Final Rule for the adoption of ICD-10-CM and ICD-10-PCS code sets. ICD-10 will replace the 30 year old ICD-9-CM **LEARN** code sets of the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Change will be paramount for us *At The Center*.

## ICD-10-CM, K259: Stomach Ulcer

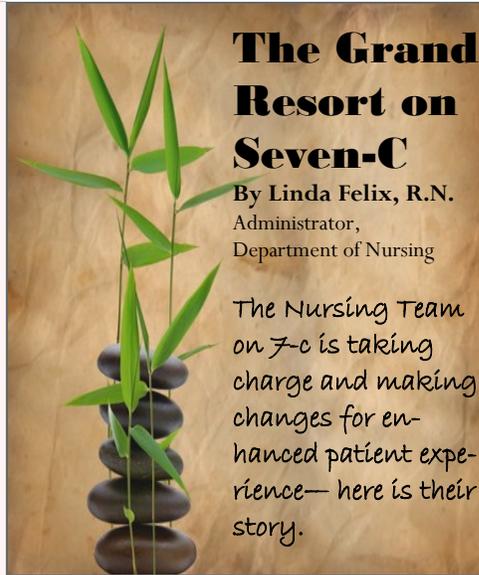
That achy feeling in your stomach at night is a result of all the money "left on the table" by the millions when our much needed health system could use those funds for increased patient services. Learn the Code, Know the Code, Use the Code.

On October 14, 2014, all inpatient and outpatient discharges will require their diagnosis to be coded and billed with ICD-10-CM codes and all inpatient procedures will need to be coded and billed with ICD-10-PCS *At The Center*. The Medical Staff will be a critical partner that will require more specificity with their documentation to assist with accurate coding and continuous improvement in data quality. H.I.M. and I.S. management has convened a committee that includes Phil Gruber, Edward Tamer, Janet Loung, Adrienne Henderson, Ramona Hernandez, Art Bernal, Latwashe **KNOW** Demmerelle and myself in addition to other ad hoc members as needed. The committee has prioritized the following activities for a smooth transition: a. System Assessment – a review of all systems and interfaces that may use the new codes, b. Communication Awareness Plan – development of a method to inform the staff of the transition, c. Physician Query Process – assisting the physicians with documentation to improve clinical and coding practices and d. Coder Assessment Education – assessment of coder skill sets and development of an education plan. Quality data will be the key to survival.

## ICD-10-CM: Sigh of Relief!!!

No code can explain the joy an organization feels when we have delivered the best care and rewarded financially.

The use of ICD-10-CD/PCS will offer more granularity to our data and will greatly enhance the facility's capability to measure quality outcomes, such as the quality performance outcome measures used in the hospital pay-for-reporting program. The granular information will also provide more precision for claims **USE**-based, value-based purchase initiatives such as the hospital-acquired condition (HAC) payment policy (AHIMA, 2013). All of the modifications to our existing processes will help ensure much needed revenue is returned to the facility and for our overall survival in the new health marketplace.



## The Grand Resort on Seven-C

By Linda Felix, R.N.  
Administrator,  
Department of Nursing

The Nursing Team on 7-c is taking charge and making changes for enhanced patient experience— here is their story.

**What** was it about your last stay at a grand or deluxe resort that made you want to go back? That was the simple question asked by the nursing Team on 7-C who set out to explore creative options to improving service delivery and customer satisfaction.

**In** an effort to improve Press Ganey patient satisfac-

tion in the areas of communication with nursing staff and nursing staff response, Olga Green, R.N., Nurse Manager 7C and her nursing team committed to changing nurse behavior and customer service to produce a positive experience outcome for their patients.

**Recalling** how they all felt when they went to a luxury resort or on a pampered vacation, the 7C nurse team concluded the patients could benefit with the same type of experience. Key elements they discovered made people feel they enjoyed their stay at a resort and wanted to come back were: 1) a welcoming environment, 2) needs were anticipated 3) excellent service, and 4) customer-centered.

**Creatively**, the team put together a Grand Resort package that included wrapped toiletries, a Welcome Pamphlet, a nicely folded gown with bed slippers on the pillow and a personally addressed Welcome Card from the Nurse Manager. These personal touches changed the hospital unit environment into one of a welcoming resort. With the atmosphere established, the nurses focused on smiling when communicating with patients, sitting with patients at the beginning of each shift and asking "What can I help you with today?" and "Is there anything else I can do for you?"

**The** results of these simple but important efforts were very positive. The Press Ganey patient satisfaction responses improved during the period of July 2012 to March 2013 as follows: Treat with courtesy and respect - lowest 63% / highest 89%, RN Listens Carefully – lowest 61% / highest 89%, RN Explains in a way that is understood – lowest 50% / highest 89%, Call Button helped as soon as wanted – lowest 50% / highest 100% and Help with toileting as soon as wanted – lowest 25% / highest 71%.

**Congratulations** are in order for the 7C nursing team for their innovated and creative approach to addressing patient satisfaction and customer service. Future plans include continued monitoring with adjustments as required and implementation of the Grand Resort model in 2E, 7A and 7B.

*More over Burke Williams and Glen Fry, the SAC+USC Health Resort is on its way!*

At the **Center**

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